



Senate

File No. 979

General Assembly

January Session, 2009

(Reprint of File No. 531)

Substitute Senate Bill No. 243
As Amended by House Amendment
Schedule "A"

Approved by the Legislative Commissioner
May 18, 2009

AN ACT CONCERNING TRAINING IN PAIN MANAGEMENT.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 19a-521 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective July 1, 2009*):

3 As used in this section and sections 19a-522 to 19a-534a, inclusive,
4 19a-536 to 19a-539, inclusive, [and] 19a-550 to 19a-554, inclusive, and
5 19a-562a, as amended by this act, unless the context otherwise
6 requires: "Nursing home facility" means any nursing home or
7 residential care home as defined in section 19a-490 or any rest home
8 with nursing supervision which provides, in addition to personal care
9 required in a residential care home, nursing supervision under a
10 medical director twenty-four hours per day, or any chronic and
11 convalescent nursing home which provides skilled nursing care under
12 medical supervision and direction to carry out nonsurgical treatment
13 and dietary procedures for chronic diseases, convalescent stages, acute
14 diseases or injuries; "department" means the Department of Public
15 Health and "commissioner" means the Commissioner of Public Health

16 or the commissioner's designated representative.

17 Sec. 2. Section 19a-562a of the general statutes is repealed and the
18 following is substituted in lieu thereof (*Effective July 1, 2009*):

19 (a) Each nursing home facility that is not a residential care home or
20 an Alzheimer's special care unit or program shall annually provide a
21 minimum of two hours of training in pain recognition and
22 administration of pain management techniques to all licensed and
23 registered direct care staff and nurse's aides who provide direct patient
24 care to residents.

25 [(a)] (b) Each Alzheimer's special care unit or program shall
26 annually provide Alzheimer's and dementia specific training to all
27 licensed and registered direct care staff and nurse's aides who provide
28 direct patient care to residents enrolled in the Alzheimer's special care
29 unit or program. Such requirements shall include, but not be limited
30 to, (1) not less than eight hours of dementia-specific training, which
31 shall be completed not later than six months after the date of
32 employment and not less than eight hours of such training annually
33 thereafter, and (2) annual training of not less than two hours in pain
34 recognition and administration of pain management techniques for
35 direct care staff.

36 [(b)] (c) Each Alzheimer's special care unit or program shall
37 annually provide a minimum of one hour of Alzheimer's and dementia
38 specific training to all unlicensed and unregistered staff, except nurse's
39 aides, who provide services and care to residents enrolled in the
40 Alzheimer's special care unit or program. For such staff hired on or
41 after October 1, 2007, such training shall be completed not later than
42 six months after the date of employment.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2009	19a-521
Sec. 2	July 1, 2009	19a-562a

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

OFA Fiscal Note

State Impact:

Agency Affected	Fund-Effect	FY 10 \$	FY 11 \$
Department of Social Services	GF - Cost	Potential Minimal	Potential Minimal

Municipal Impact: None

Explanation

Requiring additional training on pain management will increase the operational cost for nursing facilities. To the extent that these facilities care for Medicaid patients, a portion of these training costs may be passed on to the state through allowable cost rate increases. Any such increase in state costs is not expected to be significant.

House "A" exempted residential care facilities from the training requirements. This change minimally reduced the potential cost.

The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation.

OLR Bill Analysis**sSB 243 (as amended by House "A")******AN ACT CONCERNING TRAINING IN PAIN MANAGEMENT.*****SUMMARY:**

This bill requires all nursing home facilities, except residential care homes, to provide at least two hours of annual training in pain recognition and administration of pain management techniques to (1) all licensed and registered direct care staff and (2) nurse's aides who provide direct patient care. Current law requires this for all Alzheimer's special care units or programs.

The law defines a "nursing home facility" as a nursing home, residential care home, or rest home with 24-hour nursing supervision. Although residential care homes are included in the definition of nursing home facilities, they are not licensed as nursing homes. They provide some limited assistance with activities of daily living but do not provide nursing care.

*House Amendment "A" exempts residential care facilities from the training requirement.

EFFECTIVE DATE: July 1, 2009

COMMITTEE ACTION

Select Committee on Aging

Joint Favorable Change of Reference

Yea 11 Nay 0 (03/05/2009)

Public Health Committee

Joint Favorable

Yea 30 Nay 0 (03/20/2009)